STATUS: PERMIT NUMBER: SUBMISSION ID: Revision 4MP00028\*AM 1130315 FACILITY: H2-Oh-Yeah LOCATION: 2134 C.R. 224 **STATION CODE:** 401

**MONITORING PERIOD:** Ashley, OH 43003

2021-10-01 To: 2021-10-31 REPORTING LAB: COUNTY: Morrow DISTRICT: CDO ANALYST:

NO DISCHARGE INDICATOR: AL

PARAMETER	рН	Nitrogen, Ammonia (NH3)	Nitrite Plus Nitrate, Total	Nitrogen, Inorganic, Total	Phosphorus, Total (P)	E. coli	Application Rate- Wastewater, Spray
PARAMETER CODE	00400	00610	00630	00640	00665	31648	50045
UNITS	S.U.	mg/l	mg/l	mg/l	mg/l	#/100 ml	inches/day
FREQUENCY	When Disch.	When Disch.	When Disch.	When Disch.	When Disch.	When Disc	
SAMPLING							
TYPE	Grab	Grab	Grab	Grab	Grab	Grab	Total
2021-10-01							
2021-10-02							
2021-10-03		<u></u>				<b> </b>	
2021-10-04 2021-10-05		<u> </u>	<b></b>			<b> </b>	
2021-10-05	***************************************						
2021-10-07		<u> </u>					
2021-10-08		<u> </u>					
2021-10-09							
2021-10-10							
2021-10-11		<u> </u>					
2021-10-12		<b>_</b>					
2021-10-13 2021-10-14		<b>!</b>				<b></b>	
2021-10-14		<b></b>					
2021-10-15	***************************************	<b></b>					
2021-10-17							
2021-10-18							
2021-10-19							
2021-10-20							
2021-10-21							
2021-10-22							
2021-10-23		<b></b>	<b>_</b>	<b></b>		<b></b>	
2021-10-24 2021-10-25		<b></b>				<b></b>	
2021-10-25							
2021-10-27							
2021-10-28							
2021-10-29							
2021-10-30							
2021-10-31							
Minimum	000000000000000000000000000000000000000						
Maximum					0.0000000000000000000000000000000000000		200000000000000000000000000000000000000
Average							
Count							
Name of Resp Official or Aut Representa	horized <sub>have p</sub> ntive f <sub>amilia</sub>	fy under the per personally exam ar with the infor tted herein and	rmation	I Signature of Author	of Responsible ized Represent	Official or ative	Submission Date/Time
Jeffrey Williamson Wil				e			Certification Version Date 2022-03- 17 15:03

Page 1

 SUBMISSION ID:
 1130315
 STATUS:
 Revision

 FACILITY:
 H2-Oh-Yeah
 PERMIT NUMBER:
 4MP00028\*AM

 LOCATION:
 2134 C.R. 224
 STATION CODE:
 401

Ashley, OH 43003 MONITORING PERIOD :

COUNTY: Morrow REPORTING LAB:
DISTRICT: CDO ANALYST:

NO DISCHARGE INDICATOR: AL

			NO	DISCHARGE II	IDICATOR.	AL	
PARAMETER	Flow Rate	T					
PARAMETER CODE	50050						
UNITS	MGD						
FREQUENCY	When Disch						
SAMPLING	24hr Total						
TYPE	Estimate						
2021-10-01							
2021-10-02							
2021-10-03							
2021-10-04							
2021-10-05	************************************					***************************************	***************************************
2021-10-06							
2021-10-07							
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2021-10-13							
2021-10-14				***************************************			
2021-10-16							
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2021-10-30							
Minimum				***************************************			
Maximum	000000000000000000000000000000000000000			000000000000000000000000000000000000000	000000000000000000000000000000000000000		
Average	000000000000000000000000000000000000000			200000000000000000000000000000000000000	200000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
Count				·			
Name of Responsible I certify under the penalty of law that of the penalty of law that have personally examined and am familiar with the information submitted herein and based on my		I Signature of Responsible Official or Subm Authorized Representative Date					
inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.							Certification Version Date 2022-03- 17 15:03

Page 2

 SUBMISSION ID:
 1130315
 STATUS:
 Revision

 FACILITY:
 H2-Oh-Yeah
 PERMIT NUMBER:
 4MP00028\*AM

 LOCATION:
 2134 C.R. 224
 STATION CODE:
 402

Ashley, OH 43003 MONITORING PERIOD :

COUNTY: Morrow REPORTING LAB:
DISTRICT: CDO ANALYST:

NO DISCHARGE INDICATOR: AL

			N	O DISCHARGE II	NDICATOR:	AL	
PARAMETER	рН	Nitrogen, Ammonia (NH3)	Nitrite Plus Nitrate, Total	Nitrogen, Inorganic, Total	Phosphorus, Total (P)	E. coli	Application Rate- Wastewater, Spray
PARAMETER CODE	00400	00610	00630	00640	00665	31648	50045
UNITS	S.U.	mg/l	mg/l	mg/l	mg/l	#/100 ml	inches/day
FREQUENCY	When Disch.	When Disch.	When Disch.	When Disch.	When Disch.	When Disc	
SAMPLING		I					
TYPE	Grab	Grab	Grab	Grab	Grab	Grab	Grab
2021-10-01 2021-10-02							
2021-10-03							
2021-10-04						ļ	
2021-10-05		-		<b></b>		<b></b>	
2021-10-06		<u></u>				ļ	
2021-10-07 2021-10-08	***************************************	<b></b>					
2021-10-09	***************************************	•			-	•	
2021-10-10		-		<u> </u>			
2021-10-11							
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2021-10-15							
2021-10-16 2021-10-17		<b></b>	<b>-</b>			<b></b>	
2021-10-17		- <b></b>	<b></b>	<u></u>			
2021-10-19		<b></b>				•	
2021-10-20				<u> </u>			
2021-10-21							
2021-10-22							
2021-10-23							
2021-10-24		-		<u> </u>			
2021-10-25				<b></b>			
2021-10-26 2021-10-27	***************************************	<b></b>	<b>-</b>	<b>}</b>		<b>-</b>	
2021-10-27		-		<u> </u>			
2021-10-29		-					
2021-10-30				<u></u>			
2021-10-31							
Minimum							
Maximum							
Average		000000000000000000000000000000000000000					
Count							
Name of Resp Official or Aut Representa	horized have pative	fy under the per personally exame ar with the infor tted herein and	rmation	;	of Responsible ized Represent		Submission Date/Time
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Page 3

 SUBMISSION ID:
 1130315
 STATUS:
 Revision

 FACILITY:
 H2-Oh-Yeah
 PERMIT NUMBER:
 4MP00028\*AM

 LOCATION:
 2134 C.R. 224
 STATION CODE:
 402

Ashley, OH 43003 MONITORING PERIOD :

COUNTY: Morrow REPORTING LAB: DISTRICT: CDO ANALYST:

NO DISCHARGE INDICATOR: AL

			NO	DISCHARGE II	IDICATOR.	AL	
PARAMETER	Flow Rate	T					
PARAMETER CODE	50050						
UNITS	MGD						
FREQUENCY	When Disch						
SAMPLING	24hr Total						
TYPE	Estimate						
2021-10-01							
2021-10-02							
2021-10-03							
2021-10-04							
2021-10-05	*******************************					***************************************	***************************************
2021-10-06							
2021-10-07							
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2021-10-13							
2021-10-14				***************************************			
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2021-10-28							
2021-10-29 2021-10-30	***************************************					***************************************	
2021-10-30							
Minimum				***************************************			
Maximum	000000000000000000000000000000000000000			000000000000000000000000000000000000000	000000000000000000000000000000000000000		
Average	000000000000000000000000000000000000000			200000000000000000000000000000000000000	200000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
Count				·			
Name of Responsible I certify under the penalty of law that of the penalty of law that have personally examined and am familiar with the information submitted herein and based on my		I Signature of Responsible Official or Subm Authorized Representative Date					
inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.							Certification Version Date 2022-03- 17 15:03

Page 4

 SUBMISSION ID:
 1130315
 STATUS:
 Revision

 FACILITY:
 H2-Oh-Yeah
 PERMIT NUMBER:
 4MP00028\*AM

 LOCATION:
 2134 C.R. 224
 STATION CODE:
 403

Ashley, OH 43003 MONITORING PERIOD :

COUNTY: Morrow REPORTING LAB: Brookside
DISTRICT: CDO ANALYST: Charel Rex

NO DISCHARGE INDICATOR:

			N	O DISCHARGE I	NDICATOR:		
PARAMETER	рН	Nitrogen, Ammonia (NH3)	Nitrite Plus Nitrate, Total	Nitrogen, Inorganic, Total	Phosphorus, Total (P)	E. coli	Application Rate- Wastewater, Spray
PARAMETER CODE	00400	00610	00630	00640	00665	31648	50045
UNITS	S.U.	mg/l	mg/l	mg/l	mg/l	#/100 m	inches/day
FREQUENCY	When Disch.	When Disch.	When Disch.	When Disch.	When Disch.	When Disc	
SAMPLING TYPE	Grab	Grab	Grab	Grab	Grab	Grab	Grab
2021-10-01	7.86	.0394	.0002	,0002	185.6	753.41	.20
2021-10-02	7.00	1 .03.34	10002	10002	105.0	755.41	12.0
2021-10-03							
2021-10-04							
2021-10-05	8.11	.0366	.0002	.0002	190.0	180.02	.13
2021-10-06		8	<u> </u>				
2021-10-07 2021-10-08	***************************************	<b></b>	<b></b>	<b></b>		<b></b>	
2021-10-09							
2021-10-10		-				<b></b>	
2021-10-11							
2021-10-12							
2021-10-13							
2021-10-14							
2021-10-15 2021-10-16		1	<b>-</b>	<u></u>			
2021-10-17			<b>_</b>			<b></b>	
2021-10-18							
2021-10-19	8.14	.0393	.0001	.0001	166.75	118.50	.20
2021-10-20							
2021-10-21							
2021-10-22							
2021-10-23 2021-10-24			<u> </u>				
2021-10-25		-					
2021-10-26							
2021-10-27							
2021-10-28							
2021-10-29		-					
2021-10-30		8	<u> </u>				
2021-10-31		-			144.55		
Minimum	7.86 8.14	0.0366 0.0394	1.0E-4 2.0E-4	1.0E-4 2.0E-4	166.75 190.0	118.5 753.41	0.13 0.2
Maximum Average	0.14	0.0394	0.00017	0.00017	180.78333	350.6433	***************************************
Count	3	3	3	3	3	3	3
	800000000000000000000000000000000000000	fy under the ne	nalty of law that	A	f Responsible		Submission
Official or Aut	horized have r	personally exam	nined and am	Author	ized Represent		Date/Time
Representa		ar with the info					
-	ar crimina	tted herein and					
900000000000000000000000000000000000000		y of those indiv			***************************************	***************************************	
			ble for obtaining	a l			m
	the int	ieve the				Certification	
Jeffre	eV submi		n is true, accurat	ce l			Version Date
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		nformation, inc					17 15:03
000000000000000000000000000000000000000	possib	oility of fine and	<u>l imprisonment.</u>				***************************************

Page 5

 SUBMISSION ID:
 1130315
 STATUS:
 Revision

 FACILITY:
 H2-Oh-Yeah
 PERMIT NUMBER:
 4MP00028\*AM

 LOCATION:
 2134 C.R. 224
 STATION CODE:
 403

Ashley, OH 43003 MONITORING PERIOD :

COUNTY: Morrow REPORTING LAB: Brookside
DISTRICT: CDO ANALYST: Charel Rex

NO DISCHARGE INDICATOR:

			NO	DISCHARGE II	NDICATOR:		
PARAMETER	Flow Rate						
PARAMETER CODE	50050						
UNITS	MGD						
FREQUENCY	When Disch.						
SAMPLING	24hr Total						
TYPE	Estimate						
2021-10-01	.216						
2021-10-02	***************************************						
2021-10-03							
2021-10-04							
2021-10-05	.1425			***************************************			
2021-10-06		8					
2021-10-07		8					
2021-10-08							
2021-10-09 2021-10-10							
2021-10-10		8					
2021-10-12		<u></u>		***************************************			
2021-10-13							
2021-10-14							
2021-10-15							
2021-10-16							
2021-10-17							
2021-10-18							
2021-10-19	.216						
2021-10-20	***************************************						
2021-10-21							
2021-10-22							
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2021-10-25 2021-10-26							
2021-10-26							
2021-10-27		<u> </u>					
2021-10-29							
2021-10-30		**************************************				***************************************	
2021-10-31	***************************************						
Minimum	0.1425						
Maximum	0.216						
Average	0.1915			000000000000000000000000000000000000000		000000000000000000000000000000000000000	
Count	3						
Name of Responsible I certify under the penalty of law that I Official or Authorized have personally examined and am familiar with the information submitted herein and based on my			I Signature of Responsible Official or Authorized Representative Date/Tim				
Jeffrey Williamson Wil						Certification Version Date 2022-03- 17 15:03	

Page 6

 SUBMISSION ID:
 1130315
 STATUS:
 Revision

 FACILITY:
 H2-Oh-Yeah
 PERMIT NUMBER:
 4MP00028\*AM

 LOCATION:
 2134 C.R. 224
 STATION CODE:
 602

Ashley, OH 43003 MONITORING PERIOD :

COUNTY:MorrowREPORTING LAB:BrooksideDISTRICT:CDOANALYST:Charel Rex

NO DISCHARGE INDICATOR:

PARAMETER	Biochemical Oxygen Demand, 5 Day	Total Suspended Solids	Nitrogen, Ammonia (NH3)	Phosphorus, Total (P)	E. coli	Flow Rat	e Sludge Solids, Percent Total
PARAMETER CODE	00310	00530	00610	00665	31648	50050	70318
UNITS	mg/l	mg/l	mg/l	mg/l	#/100 ml	MGD	%
FREQUENCY	1/Week	1/Week	1/2 Weeks	1 / 2 Weeks	1 / 2 Weeks	1/2 Weel	cs 1/2 Weeks
SAMPLING TYPE	Grab	Grab	Grab	Grab	Grab	24hr Tota Estimate	
2021-10-01							
2021-10-02						<b></b>	
2021-10-03	0222	03.50		1035	1 5176		7000
2021-10-04 2021-10-05	.0321	.0150	.0000	.1835	1.5176	.0000	.7860
2021-10-06		***************************************		***************************************		<b>!</b>	
2021-10-07						<b></b>	
2021-10-08							
2021-10-09							
2021-10-10							
2021-10-11	.1077	.4900					
2021-10-12	<b></b>					<b></b>	
2021-10-13						<b></b>	
2021-10-14 2021-10-15			<b> </b>			<b> </b>	
2021-10-15						<b></b>	
2021-10-17						l	
2021-10-18	.1059	.5300	.0000	.1792	.1213	.0000	.0160
2021-10-19							
2021-10-20		000000000000000000000000000000000000000		000000000000000000000000000000000000000			
2021-10-21							
2021-10-22	<b></b>		<b> </b>			<b> </b>	
2021-10-23							
2021-10-24 2021-10-25	.1857	.5200				<b></b>	
2021-10-25	.103/	,3200					
2021-10-27						<b></b>	
2021-10-28							
2021-10-29							
2021-10-30							
2021-10-31							
Minimum	0.0321	0.015	0.0	0.1792	0.1213	0.0	0.016
Maximum	0.1857	0.53	0.0	0.1835	1.5176	0.0	0.786
Average	0.10785	0.38875	O	0.18135	0.81945	O	0.401
Count	4 1	4	2	2	2	2	2
Official or Aut	:horized have pe	under the per ersonally exam	nalty of law that I ined and am	Signature o Authori	f Responsible zed Represent		Submission Date/Time
Representa	gramma	r with the infor ed herein and					
Jeffre	inquiry immedi the info	of those indivi ately responsil ormation, I beli	iduals ble for obtaining	***************************************	000000000000000000000000000000000000000	000000000000000000000000000000000000000	Certification Version Date
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William			are that there es for submitting				£V££-UJ-
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Page 7

 SUBMISSION ID:
 1130315
 STATUS:
 Revision

 FACILITY:
 H2-Oh-Yeah
 PERMIT NUMBER:
 4MP00028\*AM

 LOCATION:
 2134 C.R. 224
 STATION CODE:
 602

Ashley, OH 43003 MONITORING PERIOD :

COUNTY: Morrow REPORTING LAB: Brookside
DISTRICT: CDO ANALYST: Charel Rex

NO DISCHARGE INDICATOR:

				DISCHARGE II			
PARAMETER	Sludge Solids, Percent Volatile	Freeboard	рН	Oil and Grease, Hexane Extr Method	Nitrogen Kjeldahl, Total	Nitroger Inorgani Total	
PARAMETER CODE	70322	82564	00400	00552	00625	00640	
UNITS	%	feet	S.U.	mg/l	mg/l	mg/l	
FREQUENCY	1/2 Weeks	1 / 2 Weeks	1/Month	1/Month	1/Month	1/Month	
SAMPLING	Grab	Total	Grab	Grab	Grab	Grab	
TYPE 2021-10-01							
2021-10-01							
2021-10-03						******************************	
2021-10-04	AA5.0	2	8.220	.0089	.0000	.0000	
2021-10-05	70.00.0				10000		
2021-10-06				***************************************		***************************************	
2021-10-07							
2021-10-08							
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2021-10-18	21.5560	2	8.060				
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2021-10-20		***************************************				*******************************	***************************************
2021-10-21 2021-10-22						***************************************	
2021-10-22							
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2021-10-28							
2021-10-29							
2021-10-30	***************************************	annossannossannossannossannossannossannos	***************************************	***************************************	***************************************	an-connectedana	***************************************
2021-10-31						***************************************	
Minimum	0.0	2.0	8.06	0.0089	0.0	0.0	
Maximum	21.556	2.0	8.22	0.0089	0.0	0.0	
Average	10.778	2	000000000000000000000000000000000000000	0.0089	0	0	
Count	2	2	2	1	1	1	100000000000000000000000000000000000000
Name of Resp Official or Auti Representa	horized <sub>have p</sub> tive <sub>familia</sub>	y under the pen ersonally exami r with the infor ted herein and l	mation	Signature o Author	f Responsible ( ized Representa		Submission Date/Time
inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.				<del>)</del>			Certification Version Date 2022-03- 17 15:03

Page 8

FACILITY: LOCATION: H2-Oh-Yeah 2134 C.R. 224 PERMIT NUMBER: MONITORING PERIOD: 4MP00028\*AM

2021-10-01 To: 2021-10-31

Ashley, OH 43003

### **PARAMETER COMMENTS:**

Station Code	Parameter Name	Parameter Code	Date	Unit	Comment
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